



## MEDIC RESCUE

Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community,

Sincerely,

Chuck Bowers  
Systems Manager

313 Bridge Street  
Bridgewater, Pennsylvania 15009-2906  
(724) 728-3621  
(724) 728-3696 FAX



October 23, 2008

Federal Communications Commission  
445 12th Street, S.W.  
Washington, D.C. 20554

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,

Robert P. Graves  
Telecommunications Support Specialist II

Information Technology Division  
2157 Main Street, Buffalo, NY 14214

Robert F. McGee, MD  
Chairman  
Michael A. Hall, MD  
Vice Chairman  
Richard J. Kohn  
President



John F. P...  
Sam...  
John...  
P...

October 22, 2008

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that could have an adverse impact on our organization's ability to maintain response standards for our local hospitals. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services communication for our on call and management team members who perform donor related services to our local hospitals. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that the response to hospital needs could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,

*Margaret Cosentino*

Margaret Cosentino  
Vice President of Information Systems



*Get well, be well,  
stay well at home*

Visiting Nursing Association  
of WNY, Inc.

VNA Home Care  
Services

October 21, 2008

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for caregiver communications ranging from emergency response, security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,

Judy L. Baumgartner  
Vice President and Chief Operating Officer

2100 Wehrle Drive  
Williamsville, NY 14221

Tel: 716-630-8000  
Fax: 716-630-8060

[www.VNA-WNY.com](http://www.VNA-WNY.com)

BAE Systems  
Ground Systems  
PO Box 18512  
York, Pennsylvania 17405-1512  
717-225-8000

**BAE SYSTEMS**

October 23, 2008

Dear Mr. Chairman,

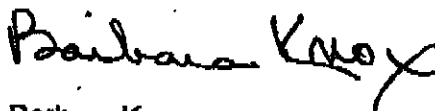
We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, may have an adverse impact on our organization's ability to maintain emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will pass through those costs to their customers.

Our organization relies heavily on paging services for our emergency response team and Production Operation communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs we, or our communication partners, will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that public safety and interoperability could be adversely impacted.

We are a defense contract primarily to the U.S. Government. We understand the USF goals are aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in getting product to the soldier in the field.

Sincerely,



Barbara Knox  
Purchasing Manager and  
USA Mobility Account Manager



**LITTLE COMPANY OF MARY**  
HOSPITAL AND HEALTH CARE CENTERS

*In Pursuit of Pain-Free Health Care®*

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,

Helen Gartelmann  
Telecommunications Supervisor



A MAGNET  
NURSING HOSPITAL



**DELNOR  
HOSPITAL**

300 Randall Road  
Geneva, Illinois 60134  
Tel 630/208.8000

Dear Mr. Kevin Martin, Chairman

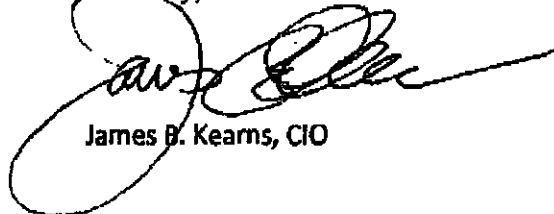
We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,



James B. Kearns, CIO



**INGALLS MEMORIAL  
HOSPITAL**

ONE INGALLS DRIVE  
Harvey, IL 60426  
(708) 333-2300

October 23, 2008

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,

*Carol Kargmeyer*  
*Supervisor*  
*Telecommunications*



**MIDC** Metro  
Infectious Disease  
Consultants, L.L.C.

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, may have an adverse impact on our organization's ability to maintain emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will pass through those costs to their customers.

Our organization relies heavily on paging services for our emergency response and public safety communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs we, or our communication partners, will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that public safety and interoperability could be adversely impacted.

We are in the business of public safety. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause for public safety issues.

Sincerely,



MANAGING PARTNER



**Northwest Community Healthcare**

800 West Central Road  
Arlington Heights, Illinois 60005.2392

Telephone 847.618.1000  
www.nch.org

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,

Department of Family Medicine (MC 663)  
College of Medicine  
1919 West Taylor Street  
Chicago, Illinois 60612-7248

Dear Mr. Chairman,

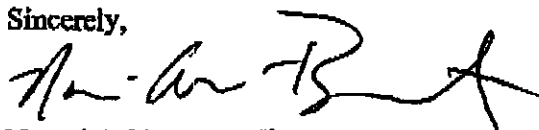
We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, may have an adverse impact on our organization's ability to maintain emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will pass through those costs to their customers.

Our organization relies heavily on paging services for our emergency response and public safety communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs we, or our communication partners, will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that public safety and interoperability could be adversely impacted.

We are in the business of public safety. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause for public safety issues.

Sincerely,



Naomi Ashley-Benedict  
Project Coordinator - Administration  
Department of Family Medicine



CALIFORNIA DEPARTMENT OF  
**Mental Health**  
**Metropolitan State Hospital**

11401 South Bloomfield Ave., Norwalk, CA 90650

October 21, 2008

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,

Roseann Augustus, Communications

2213 Cherry Street  
Toledo, Ohio 43604-2691  
(419) 251-3232

**October 24, 2008**

Kevin Martin  
Federal Communications Commission  
445 12th Street, S.W.  
Washington, D.C. 20554

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency responses, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,

**Bonnie Bach**  
**Director Safety and Communications**

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, may have an adverse impact on our organization's ability to maintain emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will pass through those costs to their customers.

Our organization relies heavily on paging services for our emergency response and public safety communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs we, or our communication partners, will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that public safety and interoperability could be adversely impacted.

We are in the business of public safety. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause for public safety issues.

Sincerely,  
John Ramsey  
Security Manager  
Allegiance Health  
Jackson, MI 49201

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.



Sincerely,



## Memorial Healthcare

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

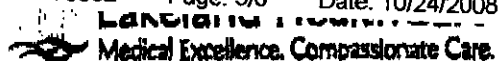
We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,

Frank Fear

Chief Information Officer





Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,

*Donita Metzger*  
Telecom Manager  
Lakeland Health Care

*Emil L. Alley*  
V.P. & C.I.O.

# Allegiance

## HEALTH

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,  
Mary M Harmon  
Supervisor Communication Center  
Allegiance Health  
Mary.harmon@allegiancehealth.org  
517-788-4879

*Alta Bates Summit  
Medical Center*

A Sutter Health Affiliate

350 Hawthorne Avenue  
Oakland, CA 94609

Information Technology

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Allen B. Arthur  
Manager, Networks & Telecommunications



October 21, 2008

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall – adding over \$50,000.00 a year) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,

A handwritten signature in black ink, appearing to read 'Steve Riess', written over a horizontal line.

Steve Riess  
Telecom Manager  
Children's Medical Center of Dallas  
1935 Medical Center Drive  
Dallas, TX 75235



**DORCHESTER COUNTY  
EMERGENCY MANAGEMENT DEPARTMENT**

**Communications Support Division**

212 Deming Way, Box 3      Summerville, SC 29483  
843-832-0341/563-0341      FAX 832-0343/563-0343

21 October 2008

FCC

Washington, DC

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, may have an adverse impact on our organization's ability to maintain emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will pass through those costs to their customers.

Our organization relies heavily on paging services for our emergency response and public safety communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs we, or our communication partners, will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that public safety and interoperability could be adversely impacted.

We are in the business of public safety. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause for public safety issues.

Sincerely,

A handwritten signature in dark ink, appearing to read "Ron Arroyo".

Ron Arroyo

Communications Coordinator

**TEXAS HEALTH RESOURCES**

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,

Nanda Lahoud, PMP, CPHIMS  
Administrative Director  
Value Realization  
THR Innovative Technology Solutions  
612 E. Lamar Boulevard  
Arlington, Texas 76011  
817 462-6058  
NandaLahoud@texashealth.org



HOWARD COUNTY  
GENERAL HOSPITAL

JOHNS  
HOPKINS  
MEDICINE

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,

Joan Becker, Director of Telecommunication  
Howard County General Hospital  
5755 Cedar Lane  
Columbia, Maryland 21044



# Calvert Memorial Hospital

*Tradition. Quality. Progress.*

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.


Sincerely,

*Brendan Cross*  
Network Manager CMH

100 HOSPITAL ROAD • PRINCE FREDERICK, MD 20678  
410-535-4000 • 301-855-1012 • TDD 410-535-5630 • [www.calverthospital.com](http://www.calverthospital.com)



**Upper  
Chesapeake**  
Medical Center

A member of  
 Upper Chesapeake Health

500 Upper Chesapeake Drive  
Bel Air, Maryland  
21014  
443-643-1000

October 22, 2008

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,



Richard Casteel  
Vice President, IT Department